



ISM-Wichita Scholarship Application

(Please Print)

ISM—Wichita, Inc.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work Phone: _____ Other: _____

Email Address: _____

Name of Employer: _____

Address of Employer: _____

City: _____ State: _____ Zip Code: _____

Name of School to/being attend(ing): _____

Declared Major and Minor (if applicable) of Study: _____

Number of credit hours currently completing this semester: _____

College credit hours received to date: _____

Awards/Scholarships/Work Experience: _____

Applicant **MUST** include these items with scholarship application:

- a. Current certified copy of transcript
- b. Current curriculum vitae or resume
- c. One letter of recommendation from an instructor, counselor, mentor, manager, or supervisor

d. One-page summary discussing why you are a suitable recipient for this scholarship including:

- o What your goals are with the degree you are seeking
- o Financial need
- o Other scholarship awards
- o Apprenticeships/Co-ops
- o Work experience

I certify the information provided in this scholarship application is accurate to the best of my knowledge.

Signature of Applicant
(Signature Required)

Date
(Date Required)

Submission:

Email the scanned documents in a single file to: ismwichita@gmail.com, tgdang3@yahoo.com and dwestenberg@cox.net

Or mail to the following:

ISM Wichita, Inc. C/O Scholarship Selection Committee
PO Box 2055,
Wichita KS, 67201